Form 990

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2016

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

De	partment o	of the Treasury Do not enter social security numbers on this form as it may not service Information shout Form 900 and its instructions to at your	y be made publi	C.	Open to Public			
Ā	-	Code :	-13		Inspection			
В		a 2016 calendar year, or tax year beginning July 1 , 2016, and en applicable: C Name of organization NMMI Foundation, Inc.	THE RESERVE OF THE PERSON OF T	e 30	, 20 17			
$\overline{\Box}$		change Doing business as		D Employ	er identification number			
F	Name c	Market			85-6010718			
\Box	Initial re		/suite	E Telepho	ne number			
H					(575)624-8035			
H								
H		d return Roswell, NM 88201		G Gross re	eceipts \$ 8,176,170			
Ш	Applicat	ion pending F Name and address of principal officer: Jimmy Barnes, President & CEO	H(a) is this a gro	oup return for	subordinates? Yes V No			
		Same as "C" above			s Included? Yes No			
<u></u>		mpt status: ☑ 501(c)(3) ☐ 501(c)() ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527	If "No	," attach a	list. (see instructions)			
7	Website		H(c) Group	exemption	number ► N/A			
K		organization: ☑ Corporation ☐ Trust ☐ Association ☐ Other ► L Year of for	nation: 1945	M State	of legal domicile: NM			
	artl	Summary						
	1	Briefly describe the organization's mission or most significant activities: The	mission of the N	IMMI For	undation, Inc.			
్లి		(Foundation) is to create, maintain and administer an endowment fund for the ben	efit of New Mexi	co Milita	ry inclinita (Alasas)			
2		to be used for research, scientific and literary purposes; and to promote generally	the growth well	fare and	maintanana of bissass			
Activities & Governance	2	Check this box ▶☐ if the organization discontinued its operations or dispose	d of more than	25% of	its net assets			
G	3			3				
e 5	4	Number of independent voting members of the governing body (Part VI, line 1	b)	4	13			
ě	5	Total number of Individuals employed in calendar year 2016 (Part V, line 2a)		5	12			
Ä	6	Total number of volunteers (estimate if necessary)		6	2			
N S	7a	Total unrelated business revenue from Part VIII, column (C), line 12		-	0			
	b	Net unrelated business taxable income from Form 990-T, line 34	• • • •	7a	0			
	 	TO BUT THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN THE COLU	Prior Yea	7b	0			
_	8	Contributions and grants (Part VIII, line 1h)		Current Year				
Revenue	1	December of the second of the		708,565	691,119			
ş				4,396	5,210			
æ	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	come (Part VIII, Column (A), lines 3, 4, and 7d)					
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	4	139,665	385,460			
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,1	71,346	2,585,571			
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	1,8	371,636	1,468,845			
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0	0			
60	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	2	12,229	212,154			
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0	n			
X	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 5,497	1	Market and Address of the				
w	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	2	93,843	337,360			
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		77,708	2,018,359			
	19	Revenue less expenses. Subtract line 18 from line 12		06,362)				
8	:		Beginning of Curre		567,212 End of Year			
Met Assets or Fund Balances	20	Total assets (Part X, line 16)		69,380				
2 P		Total liabilities (Part X, line 26)	1		51,443,300			
2.5		Net assets or fund balances. Subtract line 21 from line 20		69,412	777,980			
12	nt II	Signature Block	40,1	99,968	50,665,320			
		ies of perjury, I declare that I have examined this return, including accompanying schedules and state						
true	, correct,	and complete. Declaration of preparer (other than officer) is based on all information of which prepare	ernems, and to the er has any knowled	best of my	knowledge and belief, it is			
*****	T	Banas			6/			
Sigi	n l	Signature of officer		_///	7//7			
Her			Date					
,	-	Type or print name and title	UT > CE	0_				
		I Policy Communication of the						
Pai	•		ate	Check	if PTIN			
Pre	parer			self-emplo				
	Only	Firm's name >	Firm's	EIN >				
		Firm's address ▶	Phone	no.				
viay	the IRS	discuss this return with the preparer shown above? (see instructions)			· · Yes V No			
	3anan	Definition And States						

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**E36334	11281	(2016)	

delaconomicano	990 (2016) Page 2
Pai	Statement of Program Service Accomplishments
1	Check if Schedule O contains a response or note to any line in this Part III
•	
	Create, maintain and administer an endowment fund for the benefit of New Mexico Military Institute (NMMI) to be used
	for research, scientific and literary purposes; for increasing the building, equipment and other facilities of NMMI; to provide for scholarships; and to promote generally the growth, welfare, and maintenance of NMMI
	And the promote generally the growth, wellare, and maintenance of NMMI
2	Did the organization undertake any significant program services during the year which were not listed on the
	DRUF FOR 1990 OF 990-P77
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	Services 7
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by
	expenses, decidi out(c)(d) dru out(c)(d) organizations are required to report the amount of grants and allocations to attend
	the total expenses, and revenue, if any, for each program service reported.
and the second	
4a	(Code:) (Expenses \$ 715,409 including grants of \$ 715,409) (Revenue \$ 0)
	The NMMI Foundation maintains over 100 endowed scholarship funds and over 25 annual donor scholarship funds for
	the benefit of NMMI cadets. Earnings from the endowments and annual donations are paid directly to NMMI to provide
	scholarships to NMMI cadets at the high school and junior college level. The scholarships have varying criteria specified
	by the donor; for example scholarships may include merit-based and/or need-based requirements. NMM has established a
	Scholarship Committee that facilitates the fair and impartial granting of all scholarships in accordance with NMMI
	policies and procedures and donor stipulations.
	NMMI estimates that nearly 98% of cadets in the junior college program receive some form of financial assistance,
	which includes scholarship funding. Nearly 67% of the high school cadets receive some scholarship assistance.
	NMMI's maximum capacity is about 1,000 cadets. 417 cadets received scholarships from Foundation provided funds in
	the 2016-2017 school year. It is estimated that 450 cadets will receive scholarships during the 2017-2018 school year.
	W142-4112-512-4-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1
4b	(Code:) (Expenses \$ 279,584 including grants of \$ 279,584) (Revenue \$ 0)
	The Minist Foundation maintains approximately 20 endowments whereby earnings are used to fund NMMI Leadership
	Reaction Course programs, Low/High Ropes Course facilities and general Leadership projects and participles. The
	Damiels Leadership Center (DLC) serves over 900 cadets each year through use of state of the art technologies
	and statement and services are provided to internal and external constituencies and include the
	LowHigh Ropes Course and the Leadership Reaction Course which provide leadership challenges and grounds
	to both cadets and professionals. These facilities help build self confidence, trust and teamwork in challenges that teach
	test and remove sound readership practices. These facilities are used to train over 900 cadets annually with over
	600 cadets using the facilities multiple times throughout the school year. Over 100 participants from the community
	and over 500 youth throughout the state use the facilities annually.
	### > PROPOSE TO SERVICE OF THE PROPOSE TO THE PROP
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
4c	(Code: ) (Expenses \$ 164.544 including grants of \$ 154.544) (D)
~~~	1 100 Maria Companie
	The NMMI Foundation maintains more than ten endowments whereby earnings are used, along with other designated annual donor contributions, to provide support for certain NMMI academic programs. Expenditures from these programs include support
	for faculty and cadets. Support for many faculty members included funds for conference attendance, training programs, academic
	acquerty, professional development and related travel and lodging.
	Cadet programs supported include Close-Up (cadets attend workshops and seminars at the Capitol in Washington, D.C. to
	learn about government), field trips, band and choir travel, academic achievement programs and lyceum programs. Over 100 cadets
	participate in these programs. Over 100 cadets
	·····································
	Other uses of funds include faculty enhancement support for employees of the learning resource center, purchase of library books,
	purchase of academic software and equipment and entrepreneurial programs.
	Other program services (Describe in Schedule O.)
	(Expenses \$ 489,213 including grants of \$ 489,213) (Revenue \$ 0)
4e	Total program service expenses ► 1,648,750

Part IV	Checklist of Required Schedules	

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			100
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	1	1	
3	Did the organization engage in direct excitations by Schedule of Contributors (see instructions)?	2	1	
•	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
4	candidates for public office? If "Yes," complete Schedule C, Part I. Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	3	-	1
	election in effect during the tax year? If "Yes," complete Schedule C, Part II			
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III		/	
6		5		1
	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	1 :		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	6		1
_	the environment, historic land areas, or historic structures? If "Yes." complete Schedule D. Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III			
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a	8	1	
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V			-
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, IX, or X as applicable.	10	/	
a	and the state of t			
b	Did the organization report an amount for investments—other securities in Part V, line 10 45-45 and	11a	✓	
c	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII . Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	11b	✓	
d	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	11c		1
	reported in Part X, line 167 if "Yes," complete Schedule D, Part IX	11d		1
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		1
1	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.			
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	11f		-
b	Was the organization included in consolidated, independent audited financial statements for the tax years.	12a	1	
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes." complete Schedule 5	13	+	/
14 a	Did the organization maintain an office, employees, or agents outside of the United States?			*
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	14a		<u> </u>
	functionalisting, outsiness, investment, and program service activities outside the United States or account of			
15	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b	√	
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		
16	assistance to or for foreign individuals? If "Yes," complete Schedule F. Parts III and IV	16		*
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)		\dashv	<u>√</u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	17	\dashv	<u>√</u> .
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII. line 9a?	18	\dashv	<u>√</u>
	If "Yes," complete Schedule G, Part III	19		<u>/</u>
		Form	990 /	2016)

Part IV Checklist of Required Schedules	

	20 -	Did the organization operate and all the organization operate and the orga		Yes	No.
	E	" " " " " " " " " " " " " " " " " " "	20a		VA
	21	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts Land II		1	1
	22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III			-
	23	Did the organization answer "Yes" to Part VII. Section A line 3. 4 or 5 about agreement of	22	 '	+
		employees? If "Yes," complete Schedule J.			1
	24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a			
	b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the count.	24a 24b	N	ĮA.
	d	to delease any tax-exempt bonds?	24c	N	A
	25a	transaction with a disqualified person during the year? If "Yes," complete Schedule L. Part I	24d 25a	N	VA
	b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I.	25b		,
;	26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II			,
	27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	26		<u> </u>
2	85	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):	27		V
	a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		<u> </u>
	¢	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28b		<u>√</u>
	9	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	28c 29		<u>√</u>
3	1	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	30		<u> </u>
3	2	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	31		<u>√</u>
3	J	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I.	32	\dashv	<u> </u>
3	4	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	33	+	<u>√</u>
3	78	Did the organization have a controlled entity within the meaning of section 513/b/1992	34 35a	\dashv	√
	D.	ontrolled entity within the meaning of section 512/b/(13)2 /f "Ves." complete Sebady to B. D. and the organization with a		7,	·
36	5 .	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2.	35b	M	A.
37	, (Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R.	36	1	✓
38	3 . [Part VI	37	+	<u>/</u>
			38 \ v	300 /	ID-1-01

Form 990 (2016)

	Check if Schedule O contains a response or note to any line in this Part V			. 🗆
1a	Enter the number reported in Day 2 of Farm 1999, Fig. 1		Yes	No
b	Enter the number of Forms W 20 included in 1995. Cities 19-11 not applicable	10		
c	Did the organization comply with backup withholding rules for reportable payments to vendors a	_이 .		ļ., , ,
	reportable gaming (gambling) winnings to prize winners?	.63507367498		
2a		10	1	
	Statements, filed for the calendar year ending with or within the year covered by this return 2a		1	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	_2		W. C. W.
	Note, if the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	<u>2b</u>	╁┷╌	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	carus .	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	25	 , 	7 <u>~</u>
4a	At any time during the calendar year, did the organization have an interest in or a signature or other extends		N	41—
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	ai		
		4a	/	
U	If "Yes," enter the name of the foreign country: Cayman Islands, East Asia and the Pacific			100
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Account (FBAR).	is :		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	na said	40.0	
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<u>5a</u>		✓
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5b		1
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did th	5c	1	<u>/fl</u>
	organization solicit any contributions that were not tax deductible as charitable contributions?	0-		1
þ	if "Yes," did the organization include with every sollcitation an express statement that such contributions of	or Joa		<u> </u>
	gitts were not tax deductible?	6b	.//	10
7	Organizations that may receive deductible contributions under section 170(c).	36AC3434W	78 1	μ_{-}
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for good and services provided to the payor?	s		
ь		7a	44-11	1
c	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form seeds.	7b	M	A
	required to file Form 8282?		1	
d	If "Yes," indicate the number of Forms 9292 filed during the year.	7c	A 7 MARCO 1 18	√
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract.	/A		
f	Did the diganization, during the year, pay premiums, directly or indirectly on a personal heapfit contract?	74		/
8	If the organization received a contribution of qualified intellectual property, did the organization file Form 8800 as required	7g	-,/	<u> </u>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1000, 000	****	All	/ II
8	sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the		-28-42	1
9	sponsoring organization have excess business holdings at any time during the year?	8	W	A
	Sponsoring organizations maintaining donor advised funds.			
b	Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9a	NY	4_
0	Section 501(c)(7) organizations. Enter:	95	NXI	4_
a	Initiation fees and capital contributions included on Part VIII line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of olich facilities	100200010	., .	
1	Section 501(c)(12) organizations. Enter:	4		
	Gross income from members or shareholders			
ь	Gross income from other sources (Do not net amounts due or paid to other sources	7	``.	
	against amounts due or received from them.)	A		
2a	Section 494/(a)(1) non-exempt charitable trusts, is the organization filing Form 990 in light of Form 10412	12a	NY	aneron sa
ນ	if tes, enter the amount of tax-exempt interest received or accrued during the year	MARKET AND THE		
ა a i	Section 501(c)(29) qualified nonprofit health insurance issuers.	4		
-	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a	VAA	
D :	Enter the amount of reserves the organization is required to maintain by the states in which	3.5		
1	the organization is licensed to issue qualified health plans			
C	Enter the amount of reserves on hand			
4a (Did the organization receive any payments for indoor tanning services during the tax year?	14a	+	
b I	f "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	NZ	4

Pari	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in School to Co.	0 5		49
	Official Control of Control of the Control of	366 II	nstruc	tions.
Sect	ion A. Governing Body and Management			<u>· L</u>
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 1;	Contractor	Yes	No
	If there are material differences in voting rights among members of the governing body, or	3	-1	
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain in Schedule O.			1
b				
2	any other officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?			
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	2	-	4
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	3		Y
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	 	7
6	Did the organization have members or stockholders?	6	+/	<u> </u>
7a	one or more members of the governing body?	7a	1	
d b	stockholders, or persons other than the governing body?	7b	1	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		,	
а	The governing body?	8a		d alleganic
9	Each committee with authority to act on behalf of the governing body?	8b	1	
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.	9		
ecti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	ode.)	
l0a			Yes	No
b	Did the organization have local chapters, branches, or affiliates?	10a		√
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?			,
1a	Has 100 organization provided a complete copy of this Form poor to all mambars of the account of the	10b	NI	A
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	11a	1	
2a	Uld the organization have a written conflict of interest policy? # #No. # 4-		421.761	1031
b	Were officers, directors, or trustees, and key employees required to displace annually interest in the control of the control	12a	1	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12b	/	
	Did the organization have a written whistleblower policy?	12c	1	
4	Did the organization have a written document retention and doctraction and	13	✓	·
~	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	14	V	
a	The organization's CEO, Executive Director, or top management official	15a	1	A COLOR
U	Other officers or key employees of the organization	15b	-	
	if "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	130	Y	
va	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		7
b i	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	organization's exempt status with respect to such arrangements?	16b	4/1	4
CHO	n C. Disclosure		- 1. E. J.	<u>-</u>
B 8	List the states with which a copy of this Form 990 is required to be filed New Mexico Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 5)	501(c)(3)s c	nly)
_	wanted for public hispection, indicate now you made these available. Check all that apply.			
9 [☐ Own website ☐ Another's website ☐ Upon request ☐ Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interinancial statements available to the public during the tax year.	est pr	olicy,	and
) {	State the name, address, and telephone number of the name and the same and telephone number of the name.			
,	State the name, address, and telephone number of the person who possesses the organization's books and reco	rds:	≫	

Form		

Form 990 (2016)

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and **Independent Contractors**

Check if Schedule O contains a response or note to any line in this Part VII . . .

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- · List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- · List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- · List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- · List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization no (A) Name and Title	(B) Average hours per week (list any	(do r box, office	not of unles	Po: heck ss pe	(C) sition mor erson		one h an	(D) Reportable compensation	(E) Reportable compensation from	(F) Estimated amount of
	hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) James A. Solomon Chairman of the Board	5									
166 Sonterra Dr.; Alto, NM 88312	1	1		1				О	0	
(2) Jesus Salazar Vice-Chairman	2	-					<u> </u>		<u>v</u>	
2521 Elfego Rd. NW; Albuquergue, NM 87107		1		1				o	0	
(3) Dick Waggoner Secretary	3								<u> </u>	
P.O. Box 1027; Roswell, NM 88201		1		1			* .	o	o	
(4) Harris Kerr Treasurer	2					-				
1701 N. "L" Street; Midland, TX 79705-3027		1		1				0	o	
(5) Steve Elliott Immediate Past Chairman	2		7					<u> </u>		C
P.O. Box 1328; Santa Fe NM, 87504		1		1				0	o	
(6) Jimmy Barnes, President & CEO	40					$\neg \neg$			——— <u> </u>	0
101 W. College Blvd.; Roswell, NM 88201		1		1		1		97,639	0	
(7) Kevin O. Butler Member	1			\neg	\neg			37,035		0
P.O. Box 1171 Midland, TX 79702-1171	***************************************	1			.	1		o	0	
(8) Brad Christmas, NMMI Regent	1						_	У		0
P.O. Box 173; Wagon Mound, NM 87752	************	1		-			.	o		
(9) F. Rick Galles Member	1		\dashv	_			\neg	- 0	<u>0</u> -	0
P.O. Box 25928; Albuquerque, NM 87109		1		- }		-		o		
(10) MG Jerry Grizzle NMMI President & Ex-Officio	1		7		_				0	0
Non-Voting 101 W. College; Roswell, NM 88201		1						0		
(11) Earl A. "Tres" Latimer Member	1		7	一十	+		+	<u> </u>	0	0
1908 W. 27th Street; Roswell, NM 88201		1						0		
(12) Stirling Spencer, NMMI Regent	1		7	_			-		0	0
P.O. Box 36, Carrizozo, NM 88301		1								
(13) David R. Vandiver Member	1	$\neg \uparrow$	7	+	\top	_	-	<u>v</u>		0
706 W. Quay; Artesia, NM 88210	***************************************	1	- [-		0		
(14) Joe M. Vicente Member; NMMi Regent Appt.	1	$\neg \uparrow$	十	十	\top		十		0	
P.O. Box 457; Vaughn, NM 88353-0457		1						o	0	0

(A) Name and title	(B) Average hours per week (list any	box, office	unies er and	Pos neck ss pe	rson	e than is boti lor/trus	h an tee)	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of
	hours for related organizations below dotted line)	ndividu:	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC	related organizations (W-2/1099-M/SC)	other compensation from the organization and related organizations
(15)	-					å				
(16)										
(17)										
(18)										
(19)			-	_	_					
(20)			_	_	\dashv		_			
(21)			_	_			_			
(22)	 									

(23)										
(24)										
(25)			1	1						***
tb Sub-total . c Total from continuation sheets to Part d Total (add lines 1b and 1c)						.)		97,839	0	
2 Total number of individuals (including but reportable compensation from the organi	not limited	to the	se l	iste	d a	bove)	who		o re than \$100,000	of
 Did the organization list any former of employee on line 1a? If "Yes," complete 5 For any individual listed on line 1a, is the organization and related organizations individual	ficer, directo Schedule J for sum of repo greater than	or suc ortabl or \$15	th in e cc 0,00	omp 20?	idue ens If	ation "Yes,	and	d other compe	nsation from the dule J for such	3 🗸
5 Did any person listed on line 1a receive o for services rendered to the organization?	r accrue con ' If "Yes," co	npens mplet	atio e Sc	n fr che	om dule	any u	ınr e r suc	lated organiza ch person	tion or individual	
Complete this table for your five highest compensation from the organization, Rep year.	ompensated	i inde	nen	der	ot co	ntrac	-tore	that each mal	more than \$100 or within the org	5 √ ,000 of anization's tax
(A) Name and business addr	ess							(B) Description of serv	ices ((C) Compensation

Total number of independent contractor received more than \$100,000 of compensa	s (including	but	not	lim	ited	to t	hos	e listed above	e) who	

	, i	Check if Schedule			(A) Total revenue	(B) Related or	(C) Unrelated	(D) Revenue
		All Mark Street			TOTAL (Avelida	exempt function revenue	business revenue	excluded from tax under sections
and carel omitted Amounts	1a	Federated campaign	ns	1a				512-514
2	b	· · · · · · · · · · · · · · · · · · ·		1b	7		and the second	
Ž	¢	Fundraising events		1c				
ğ	d	· · · · · · · · · · · · · · · · · · ·		1d	7			
	e	Government grants (co	ntributions)	1e			1	
2	f	All other contributions,	gifts, grants,					
2		and similar amounts not in		1f 691,11	9			
2	g	Noncash contributions inclu	ided in lines 1a-11	: \$ 4,87				
3	h	Total. Add lines 1a-1	<u> 1f </u>		691,119		100	
				Business Code				
	2a	Columbarium revenue		900099	5,210	5,210		
į	b	******************		The state of the s	****	www.www.www.a	***************************************	
	C	**************		Marie Carlo Control Cont	The State of the S	and the second section of the desired where the	Karakan da marakan da m	
	d	*******			NAMES OF STREET, STREE	A COLUMN TO SERVICE STREET, SE	***************************************	The statement of the second se
-	e	****			The state of the s	ومعرون والمساور والم	**************************************	The state of the s
	f	All other program ser				erake n eraken	***************************************	****
.	g	Total. Add lines 2a-2	<u> </u>		5,210		1	
	3	Investment income	(including di	vidends, interest,			I The second second	1
		and other similar amo			404,796			404 700
	4	Income from investmen	it of tax-exemp	t bond proceeds		4737 - Marie 11933 - 11934 - 11934 - 11934 - 11934 - 11934 - 11934 - 11934 - 11934 - 11934 - 11934 - 11934 - 1	The transfer of the second of	404,796
	5	Royalties		>	319		- Constitution of the Cons	S.4.0
-			(i) Real	(ii) Personal		***************************************		319
	6a	Gross rents	368,6	97				
	b	Less: rental expenses		TO THE PROPERTY OF THE PROPERT		10 m		
	C	Rental income or (loss)	368,6	97				
	đ	Net rental income or (loss)		368,697			300 003
	7a	Gross amount from sales of	(I) Securities	(ii) Other				368,697
		assets other than inventory	5,082,5	85 1,607,000	1			
	b	Less: cost or other basis		William	1:			
		and sales expenses .	3,499,1	76 2,091,423				
(i)	C	Gain or (loss)	1,583,4	CONTRACTOR OF THE PROPERTY OF			Vicinity (II)	
e .	ď	Net gain or (loss) .		>	1,098,986	71.2	ar na range de la composition de la co	4 000 000
				gradust and the desired desired and an analysis of the second and an				1,098,986
		Gross income from fu	ndraising					
e de la composition della comp		events (not including \$						
		of contributions reporte	d on line 1c).				1	All Carries
		See Part IV, line 18 .		а				
		Less: direct expenses		b		4.		
b c	¢ :	Net income or (loss) fr	om fundralsir	g events . 🕨	And the second s		and the second s	
	9a	Gross income from gai	ming activities	· ·				
g		See Part IV, line 19 .		a				2 3
g				The second secon		4.00		
	b :	Less: direct expenses		b			THE RESERVE OF THE PARTY OF THE	and the state of t
	b c	Less: direct expenses Net income or (loss) fro	om gaming a	ctivities >			A Second Section to Control of the Section Sec	
	b c	Less: direct expenses Net income or (loss) fro Gross sales of inv	om gaming a ventory, less	ctivities >				
	b c)a	Less: direct expenses Net income or (loss) fro Gross sales of inverturns and allowance	om gaming a ventory, less s	ctivities >				
10	b c)a	Less: direct expenses Net income or (loss) fro Gross sales of invite turns and allowance Less: cost of goods so	om gaming a ventory, less s	ctivities >				
10	b c)a	Less: direct expenses Net income or (loss) fro Gross sales of inverturns and allowances Less: cost of goods so Net income or (loss) fro	om gaming a ventory, less s old om sales of ir	ctivities				8
10	b c)a	Less: direct expenses Net income or (loss) fro Gross sales of invite turns and allowance Less: cost of goods so	om gaming a ventory, less s old om sales of ir	ctivities >		0		
10	b c a b	Less: direct expenses Net income or (loss) fro Gross sales of invertures and allowances Less: cost of goods so Net income or (loss) fro Miscellaneous Re Increase Cash Value of	om gaming a ventory, less s old om sales of invenue	ctivities	and the second second second second	16 337		
10	b c a b	Less: direct expenses Net income or (loss) fro Gross sales of invertures and allowances Less: cost of goods so Net income or (loss) fro Miscellaneous Re	om gaming a ventory, less s old om sales of invenue	ctivities	16,337	16,337 107		
10	b c a b	Less: direct expenses Net income or (loss) fro Gross sales of invertures and allowances Less: cost of goods so Net income or (loss) fro Miscellaneous Re Increase Cash Value of	om gaming a ventory, less s old om sales of invenue	ctivities	and the second second second second	16,337 107		
10	b c)a b c	Less: direct expenses Net income or (loss) fro Gross sales of inverteurns and allowances Less: cost of goods so Net income or (loss) fro Miscellaneous Re Increase Cash Value of Miscellaneous All other revenue	om gaming a ventory, less s old om sales of ir venue Life Insur	ctivities	16,337			
11	b c a l	Less: direct expenses Net income or (loss) fro Gross sales of invertures and allowances Less: cost of goods so Net income or (loss) fro Miscellaneous Re Increase Cash Value of Miscellaneous	om gaming a ventory, less s old om sales of ir venue Life Insur	ctivities	16,337			

Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must complete

000	tion 501(c)(3) and 501(c)(4) organizations must con Check if Schedule O contains a respon	rpiete all columns. A	Il other organization	s must complete coli	
Do 1 8b,	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and	(D) Fundralsing
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	engelettingsteppillettingspennentillengis besocher und generalistische	A dispersion and a species was a dispersion of the College Species and the Col	General expenses	expenses
2	Grants and other assistance to domestic individuals. See Part IV, line 22	1,404,972	1,404,972		
3	Grants and other assistance to foreign	63,873	63,873		
	organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members	THE THE STREET STREET,			
- 5	Compensation of current officers, directors, trustees, and key employees			***************************************	- Andrea (Reference), benedicators
6	Compensation not included above, to disqualified	104,127	-	104,127	
	persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salarles and wages	50,881	The state of the s		
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)			50,881	and the state of t
9	Other employee benefits	21,281 25,020	· pv kov staravis o nakonstšenotanjekom tekstomi mai ponaž svod moza post	21,281	tert mystersensment entre entre entre entre operations operations and the second operations of the second operations operations operations of the second operations of the second operations o
10	Payroll taxes	10,845	The second secon	25,020 10,845	The first of the section of the sect
11	Fees for services (non-employees):	······································	· · · · · · · · · · · · · · · · · · ·		
а	Management				
b	Legal	36,468		36,468	- 1. p. 10 and a few to the second and the second
. c	Accounting	8,929	2000/cm/caping/2006/2006/2006/2006/2006/2006/2006/200	8,929	Harriston Control State Con
e	Lobbying	680	680		The state of the s
ť	Investment management fees			-	· · · · · · · · · · · · · · · · · · ·
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	150,861	113,146	37,715	in the second section of the second s
12	Advertising and promotion	7,309	1,812	-	5,49
13	Office expenses	10,127	The second secon	10,127	and the second s
14	Information technology	3,556	***************************************	3,556	SALAMANA ORONO II PONNENSI SALAMANI SALAMANI SALAMANI SALAMANI SALAMANI SALAMANI SALAMANI SALAMANI SALAMANI SA
15	Royafties		of the secretary of the section of the second that grade and the section of the second		Military and Anti-Anti-State States And Contribution of the Anti-States of the Anti-State
16	Occupancy	495		495	*************************************
17 18	Payments of travel or entertainment expenses	85		85	A CONTRACTOR OF THE PROPERTY O
	for any federal, state, or local public officials				A STATE OF THE STA
19 20	Conferences, conventions, and meetings . Interest	3,991	***	3,991	
21	Payments to affiliates		***************************************		
22	Depreciation, depletion, and amortization			-	en direction in descriptions, references appearant in descriptions and consequences are also
23	Insurance	18,439		10.420	-
24	Other expenses, Itemize expenses not covered			18,439	
	above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column	St. Company			
_	(A) amount, list line 24e expenses on Schedule O.)			· V	And the second
a b	Donor Life Insurance Program Property Taxes and Maintenance	50,727	50,727		
C	Staff and Faculty Support	30,914	The second secon	30,914	was not to the same of the sam
d	Columbarium Expenses	13,540 1,239	13,540	A CONTRACTOR CONTRACTO	
е	All other expenses	1,200		1,239	
5	Total functional expenses. Add lines 1 through 24e	2,018,359	1,648,750	364,112	
6	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundralsing solicitation. Check here ▶ ✓ if following SOP 98-2 (ASC 958-720)	nave est engage assault friends in it is a second and a s		SUT-112	5,497

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 103,375 145,313 2 2 2,061,438 532,471 3 3 391,611 360,954 4 4 24,287 6,639 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary 6 7 R 8 9 Prepaid expenses and deferred charges 9 5,556 3,718 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a Less: accumulated depreciation b 10b 19,527 10c 5,876,852 3,807,522 Investments—publicly traded securities 11 12,958,531 11 13,153,293 Investments-other securities. See Part IV, line 11 12 12 24,112,302 31,932,331 Investments-program-related. See Part IV, line 11 . . . 13 13 14 14 15 Other assets. See Part IV, line 11 15 1,435,428 1,501,059 16 Total assets. Add lines 1 through 15 (must equal line 34) . 16 46,969,380 51,443,300 17 17 407,273 385,292 18 18 19 19 362,139 392,688 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D. 21 21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and 22 23 Secured mortgages and notes payable to unrelated third parties . . . 23 24 Unsecured notes and loans payable to unrelated third parties . . . 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 25 Total liabilities. Add lines 17 through 25 26 769,412 777,980 Organizations that follow SFAS 117 (ASC 958), check here ▶ 📝 and **Fund Balances** complete lines 27 through 29, and lines 33 and 34. 16,996,281 27 18,064,602 28 9,427,327 12,525,346 Permanently restricted net assets. . . 19,776,360 29 20,075,372 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34, Net Assets or Capital stock or trust principal, or current funds 30 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 32 Retained earnings, endowment, accumulated income, or other funds. 32 33 46,199,968 33 50,665,320 Total liabilities and net assets/fund balances . 46,969,380 34 51,443,300 Form 990 (2016)

	Reconciliation of Net Assets			Page 1
Sanding				
1	Check if Schedule O contains a response or note to any line in this Part XI		<u> </u>	<u> </u>
2	Total expenses (must equal Part VIII, column (A), line 12)	1		2,585,571
3	Total expenses (must equal Part IX, column (A), line 25)	2	······································	2,018,359
4	Revenue less expenses. Subtract line 2 from line 1	3		567,212
5	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)). Net unrealized gains (losses) on investments.	4		46,199,968
6	Net unrealized gains (losses) on investments Donated services and use of facilities	5		3,898,140
7		6		
8	Investment expenses	7		
9	Other changes in net assets or fund balances (explain in Schedule O)	8		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line	9		
	33, column (B))			
Par	t XII Financial Statements and Reporting	10		50,665,320
	Check if Schedule O contains a response or note to any line in this Part XII			2002
loculiti mephpobado poq	The state of the s			
1	Accounting method used to prepare the Form 990: Cash Accrual Other			Yes No
	If the organization changed its method of accounting from a prior year or checked "Other," ex	entala la		1 1
	Schedule O.	cpain in		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			
	If "Yes," check a box below to indicate whether the financial statements for the year were com-	nllad av	2a	
	reviewed on a separate basis, consolidated basis, or both:	blied or		
	Separate basis Consolidated basis Both consolidated and separate basis			F
b	Were the organization's financial statements audited by an independent accountant?			and the second
	If "Yes," check a box below to indicate whether the financial statements for the year were audit	nd on a	2b	
	separate basis, consolidated basis, or both:	eu on a		
	Separate basis Consolidated basis Both consolidated and separate basis			
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for o	cornicht	100	
	of the audit, review, or compilation of its financial statements and selection of an independent account	versiyi il		
	If the organization changed either its oversight process or selection process during the tax year, ex	nlain in	2c	
	Schedule O.	Piairi III		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth in	25.454.0	
	the Single Audit Act and OMB Circular A-133?			·VA
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under	ran the	3a	MAH
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	igo ine idite	3b	11/1
- cr-waredayed	200 3201	JUIST.	30	NYTT

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

OMB No. 1545-0047 2016

Open to Public Inspection

Department of the Treasury Internal Revenue Service

NMMI Foundation, Inc.

Attach to Form 990 or Form 990-EZ.

Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990, Name of the organization Employer identification number

85-6010718 Reason for Public Charity Status (All organizations must complete this part.) See instructions. Part The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) ☐ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) ☐ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 An organization that normally receives: (1) more than 331/2% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/2% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, ¢ its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) d that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported organization (ii) EIN (iii) Type of organization (iv) is the organization (v) Amount of monetary (vi) Amount of (described on lines 1-10 isted in your governing support (see other support (see above (see instructions)) instructions) instructions) Yes No (A) (B) (C) (D) (E)

Ga	Support Schedule for Organiz	ations Descr	ibed in Sect	ions 170(b)(1)(A)(iv) and	170(b)(1)(A)(v	Page I
	(Complete only if you checked t	he box on line	5.7. or 8 of	Part I or if the	e organizatio	n failed to au	alify under
Sec	Part III. If the organization fails to tion A. Public Support	o quality unde	er the tests lis	sted below, p	lease comple	ete Part III.)	
	endar year (or fiscal year beginning in)	(a) 2012	/W 2012	(-) 0044	T / 11 00/5	T	
1	Gifts, grants, contributions, and membership fees received. (Do not	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
2	include any "unusual grants.") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	731,630	2,058,301	1,170,806	708,565	691,119	5,360,421
3	The value of services or facilities furnished by a governmental unit to the organization without charge	4,000	4,000	4,000	4,000	4,000	20,000
4	Total. Add lines 1 through 3	735,630	2,062,301	1,174,806	712,565		5,380,421
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						1,727,931
6	Public support. Subtract line 5 from line 4				100		3,652,490
	ion B. Total Support						
Cale:	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
8	Amounts from line 4	735,630	2,062,301	1,174,806	712,565	695,119	5,380,421
	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	766,197					
9	Net income from unrelated business activities, whether or not the business is regularly carried on	700,197	730,690	833,924	925,280	773,812	4,029,903
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	1,500	400	4,522	20	107	6,549
11	Total support. Add lines 7 through 10	4.4	100			101	9,416,873
12 13	Gross receipts from related activities, etc. First five years. If the Form 990 is for th organization, check this box and stop her	e organization'	s first, second	, third, fourth,	or fifth tax ye	12 ar as a section	007.400
Sacti	on C. Computation of Public Suppor			· · · · · ·			· • • ·
14	Public support percentage for 2016 (line 6			((0)			
15 16a	Public support percentage from 2015 Sch 331/2% support test—2016. If the organization qualibox and stop here. The organization quali	edule A, Part II, zation did not d ifies as a public	, line 14 theck the box ily supported o	on line 13, and			№ [7]
b	331/3% support test—2015. If the organization of this box and stop here. The organization of	ation did not c	heck a box on	line 13 or 16a	and line 15 is	221m04 as ma	a abant
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization med Part VI how the organization meets the "forganization".	16. If the organets the "facts-a acts-and-circur	nization did no and-circumstar mstances" tesi	t check a box nces" test, che t. The organiza	on line 13, 16 ock this box ar ation qualifies	a, or 16b, and lad stop here. Eas a publicly st	ine 14 is xplain in upported
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organizat Explain in Part VI how the organization m supported organization	15. If the organion meets the eets the "facts	nization did no "facts-and-cir -and-circumst	t check a box cumstances" ances" test. Th	on line 13, 16 test, check th	a, 16b, or 17a, is box and sto	and line
18	Private foundation. If the organization did instructions	not check a bo	ox on line 13, 1	6a, 16b, 17a, 6	or 17h, check	this hav and so	

Sec	(Complete only if you checked to lif the organization falls to qualify tion A. Public Support	under the te	ests listed be	low, please co	omplete Part	11.)	N/A
	indar year (or fiscal year beginning in)	(-) 0010	T (1) 0040	T () 00 ()	7		.
1	Gifts, grants, contributions, and membership fees	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise				 	 	
	sold or services performed, or facilities						
	furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an		 			<u> </u>	
	unrelated trade or business under section 513	le de la lace					
4	Tax revenues levied for the					ļ	
	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
7a							
	received from disqualified persons						
b	Amounts included on lines 2 and 3			1			·····
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from			**			
	line 6.)					3.4	
	ion B, Total Support						
Caler	ıdar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9	Amounts from line 6					12/2010	.,
10a	Gross income from interest, dividends,						***************************************
	payments received on securities loans, rents,						
	royalties and income from similar sources .						
b	hose l	4					
	section 511 taxes) from businesses		**	1.0			
	acquired after June 30, 1975						
C	Add lines 10a and 10b	-					
11	Net income from unrelated business						
	activities not included in line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
4.2	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14		1					
1**	First five years. If the Form 990 is for the organization, check this box and stop her	e organization	's first, second	d, third, fourth,	or fifth tax yes	ar as a section	501(c)(3)
200ti	on C. Computation of Public Support				<u> </u>		
15	Public support percentage for 2016 (line 8	column (f) di	; ; -	2 - 1 (0)		T	
16	Public support percentage from 2015 Sch	, column (i) div	nueu by IINE 11 It line 15	o, column (I))	• • • • •	15	%
	on D. Computation of Investment Inc	ome Percen	ntage		<u> </u>	16	%
17	Investment income percentage for 2016 (li			line 13 colum	n (6)	17	
18	Investment income percentage from 2015	Schedule A P	art III line 17	mie 10, colum	" (V <i>II)</i>		%
19a	331/3% support tests-2016. If the organiz	ation did not	check the hov	on line 14 and	d line 15 is mo	18 re than 331m9/	%
	17 is not more than 331/3%, check this box a	nd stop here.	The organization	n qualifies as a	publicly sunner	ted organizatio	, anu ine n b ⊾ m
b	331/3% support tests-2015. If the organiza	ition did not ch	eck a box on l	ine 14 or line 10	a and line 16 !	e mare than 22	n . ▶ □
	line 18 is not more than 331/3%, check this b	ox and stop he	re. The organiz	ration qualifies a	as a publicly sur	oported organiz	ation ▶ 🗍
	Private foundation. If the organization did			•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		

ar					
				nization	

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. A	All Sup	porting	Organizations

260	ction A. All Supporting Organizations		-/-/-	#-1-
1	The state of the s	···········	Yes	No
	class or purpose, describe the designation. If historic and continuing relationship, explain.			
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).			
38	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	A provinciana, minor		
ŧ	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3a		
C	purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3b		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.	3c		
b	supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4a 4b		
C	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).			
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5a		
6	Substitutions only. Was the substitution the result of an event beyond the organization's control? Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	5b 5c		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-FZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? if "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).			•
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	8		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.	9a 9b		
C	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.	10a		
b	determine whether the organization had excess business holdings in the tax year? (Use Schedule C, Form 4720, to	104		

10b

	Supporting Organizations (continued)	***************************************	***************************************	-
11	Han the organization assessed with		Yes	No
	Has the organization accepted a gift or contribution from any of the following persons? A person who directly or indirectly controls, either along or together with persons departs of the first state of			-
	below, the governing body of a supported organization?	11a		
t	The state of the s	11b		†
***************************************	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c	***************************************	1
360	tion B. Type I Supporting Organizations	NHA	***************************************	
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	Yes	No
2	Did the organization operate for the benefit of any supported organization other than the supported	1		34.
	organization(s) that operated, supervised, or controlled the supported organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.			
Sect	ion C. Type II Supporting Organizations	N/A		
		NA	Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Sect	ion D. All Type III Supporting Organizations	V/A		
1 ,	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		Yes	No
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).			
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.			
Secti	on E. Type III Functionally Integrated Supporting Organizations	1/4		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see			
а	☐ The organization satisfied the Activities Test. Complete line 2 below.	Instruc	tions)	
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
C	The organization supported a governmental entity. Describe in Part VI how you supported a government entity	leee ine	tnictic	inel
2	Activities Test. Answer (a) and (b) below.			
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify		Yes I	<u>No</u>
	those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
ь	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.	20	+	
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		7.7

Schedule A	(Form	990 or	990-EZ)	2016

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Or	gan	izations	N/A
1 Li Check here if the organization satisfied the Integral Part Test as a qualifying	n tn	ist on Nov. 20, 1070 favole	in in David VIII Com
metrodions. All other type in non-functionally integrated supporting orga	niza	tions must complete Secti	ons A through E.
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4).	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	18		
b Average monthly cash balances	16		
c Fair market value of other non-exempt-use assets	10		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5	**************************************	
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	The state of the state of the	
7 Check here if the current year is the organization's first as a non-functionally instructions).	/ inte	grated Type III supporting	organization (see

الغيا		(3) Supporting Organ	izations (continued)	N/A
-	tion D - Distributions	Current Year		
1	Amounts paid to supported organizations to accomplish	**************************************		
2	Amounts paid to perform activity that directly furthers ex	Committee of the control of the cont		
Filiate Mention (Contraction)	organizations, in excess of income from activity	Participant Control		
3	Administrative expenses paid to accomplish exempt pur	poses of supported org	anizations	And any one part appropriate part absorber to provide the provide provide the form of the first
4	Amounts paid to acquire exempt-use assets	The second secon	A. A. L. L. C. L. L. C. L.	nd-Marian She (San Office San Anti-picture) and a second of the san Anti-picture of the san Anti-pictu
5	Qualified set-aside amounts (prior IRS approval required		n de la companya da de la companya da de companya da de companya da de comp ira de la companya da de la companya	and the continuous and the conti
6	Other distributions (describe in Part VI). See Instructions	·	to the best of the state of the	**************************************
7	Total annual distributions. Add lines 1 through 6.	And have the same source of the same sections of the same section	the part of the state of the st	The state of the s
8	Distributions to attentive supported organizations to whice (provide details in Part VI). See instructions.	ch the organization is re	sponsive	General Control of the Control of th
9	Distributable amount for 2016 from Section C, line 6	AND THE PERSON OF THE PERSON O	and the same of th	
10	Line 8 amount divided by Line 9 amount	The contribute of the contribu	ide yanda keesalisiik ee leesaa maan kaas eli ooli ih to eelijeening in tardeening aan aan in oo eelijeening a	
***************************************			(ii)	(iii)
S	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	Underdistributions Pre-2016	Distributable Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2016 (reasonable cause required—explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2016:			The state of the s
a	3,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1			
b			Harrison and the second	
c	From 2013			
ď	From 2014			
e	From 2015			
f	Total of lines 3a through e			The state of the s
g	Applied to underdistributions of prior years			
h			Constant Con	
1	Carryover from 2011 not applied (see instructions)	***************************************		The state of the s
i	Remainder, Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2016 from			
	Section D, line 7:			
a	Applied to underdistributions of prior years			
ь	Applied to 2016 distributable amount			
c	A CONTRACTOR OF THE PROPERTY O			······································
5	Remaining underdistributions for years prior to 2016, if			· · · · · · · · · · · · · · · · · · ·
•	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2016. Subtract lines 3h		Production Company of the Company of	
Ŭ	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2017. Add lines 3			
	and 4c.			
8	Breakdown of line 7:			And the second s
а				
b	Excess from 2013			and the second property of the second
C	Excess from 2014		The Control of the Co	West Charles on the Charles of the Control of the C
d	Excess from 2015			rice (Carlot and Carlot and Carlo
е	Excess from 2016			

SACCIONES COMMENTS PRO	B, lines 1 and 2; 3a, and 3b; Part	V, Section A, line Part IV, Section V. line 1: Part V.	98 1, 2, 3b, 3c, 4b C, line 1; Part IV, Section B. line 1	ions required by P b, 4c, 5a, 6, 9a, 9b Section D, lines 2 e; Part V, Section dditional informati	, 9c, 11a, 11b and 3; Part I\ D lines 5.6 :	, and 11c; Part I /, Section E, line	V, Section
Part II; Line	10; Other Income	के के को को के के के का का को के का	r o months secured to be the to a medicinal to the to the the to the the total to the total to the total to the total total to the total t	********************			***************************************
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2013 - \$400	miscellaneous			m to the collection of the collection and the collection of the co			
2014 - \$4,52				al distribution and an area property as a second			
2015 - \$20 m				the second section of the second section is a second section of the second section of the second section is a second section of the second section of the second section of the s			
2016 - \$107	miscellaneous			· · · · · · · · · · · · · · · · · · ·			
	· · · · · · · · · · · · · · · · · · ·						
1. O. A. B.	知《····································			* ** ****** ** 10. 10. 10. 10. 10. 10. 10. 10. 10. 10.			
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t de	. क्षा काम्य काम्य के काम्य के काम्य के क्ष्मके के क्ष्मके के अ अध्य अध्य के श्रवकार			के हा च के हो के क्षेत्री के का के का के का के का का के का के के का के हैं।			
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Schedule B

(Form 990, 990-EZ, or 990-PF)

Schedule of Contributors

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Attach to Form 990, Form 990-EZ, or Form 990-PF. ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

Name of the organization Employer identification number NMMI Foundation, Inc. 85-6010718 Organization type (check one): Filers of: Section: Form 990 or 990-EZ ☑ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation ☐ 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation ☐ 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1)

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions

\$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No. 1545-0047

	Revenue Service Inform	ation about Schedule C (Form 990 or 9	90-EZ) and its instru	ictions is at www.irs.gov/fon	m990. Inspection
If the	organization answered "Ye	es," on Form 990, Part IV, line 3, or F	orm 990-EZ. Part V	, line 46 (Political Campaig	n Activities) then
• 5	ection 501(c)(3) organization	s: Complete Parts I-A and B. Do not c	omplete Part I-C.		
• \$	ection 501(c) (other than sec	ction 501(c)(3)) organizations: Complete	Parts I-A and C bel	ow. Do not complete Part I-I	3.
* S	ection 527 organizations: Co	emplete Part I-A only.			
If the	organization answered "Ye	os," on Form 990, Part IV, line 4, or F	orm 990-EZ, Part V	I, line 47 (Lobbying Activitie	es), then
• 5	ection 501(c)(3) organization	s that have filed Form 5768 (election u	nder section 501(h)):	Complete Part II-A Do not	complete Dort II. D
* 5	ection 501(c)(3) organization	s that have NOT filed Form 5768 (elect	ion under section 50	11(h)): Complete Part II.P. Do	not complete Dant II A
H HIE	organization answered "Ye	3s," on Form 990, Part IV, line 5 (Pro	xy Tax) (see separa	ite instructions) or Form 99	O-EZ, Part V, line 35c (Proxy
i avì l	see separate instructions),	ruen			
Name	ection 501(c)(4), (5), or (6) or of organization	ganizations: Complete Part III.			
				Employer ide	entification number
20072428839906	Foundation, Inc. LA Complete if the	a organization is avamet			85-6010718
200	Provide a description	ne organization is exempt un	der section 501	(c) or is a section 527	organization. W/A
	definition of "political ca	of the organization's direct and i	noirect political c	ampaign activities in Pai	rt IV. (see instructions for
2		ity expenditures (see instructions)			
3	Volunteer hours for polit	ical campaign activities (see instru	ictions)		3
Part	LB Complete if the	ne organization is exempt un	der section 501	(0)(3)	
1	Enter the amount of any	excise tax incurred by the organiz	ration under section	10/10/. 20 4055	* N/A
2	Enter the amount of any	excise tax incurred by organization	n managers unde	r section 4955	
3	If the organization incurr	ed a section 4955 tax, did it file Fo	orm 4720 for this v	rear?	
4a	Was a correction made?)		var,	Yes No
b	If "Yes," describe in Par		• • • • • •		· . LYes LNo
Part	G Complete if the	e organization is exempt und	er section 501	c) except section 50	100/20 1//0
1	Enter the amount direc	tly expended by the filing organi	zation for section	527 exempt function	(C)(O): 1\1/1
	activities				
2	Enter the amount of the	filing organization's funds contri	buted to other or	anizations for section	-
	527 exempt function act	ivities			
3	Total exempt function	expenditures. Add lines 1 and 2	. Enter here and	on Form 1120-POL.	**************
	line 17b , , ,			· · · · · · · · • · \$	
4	Did the filing organization	n file Form 1120-POL for this year	?		Yes No
5	Enter the names, addres	ses and employer identification nu	mber (FIN) of all s	ection 527 political avant	madimum de suiste is de se estit
	organization made paym	onts, for each organization listen.	enter the amount	naid from the filing around	imations a female Alexander
	tile amount of political ci	Drumbutions received that were pro	mptiv and directly	delivered to a congrete r	nlitical againstian acres
	as a separate segregated	fund or a political action committe	e (PAC). If addition	nal space is needed, provi	de information in Part IV.
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's	contributions received and
				funds. If none, enter -0	promptly and directly delivered to a separate
					political organization. If
***************************************					none, enter -0
(1)					
(2)					
(3)					
(4)					
·····					
(5)					
(6)		********************************			

Schedule	С	(Farm	890	or	990-	EΖ	2016

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2	ort II-A Complete if the organiza section 501(h)).	tion is exempt	under section 5	01(c)(3) and fil	ed Form 5768 (ele	ction under
	Check ► ☐ if the filing organization name, address, EIN, ex	oenses, and sh	are of excess lob	bying expenditi	ures).	pup member's
B	Check ▶ ☐ if the filing organization	checked box A	and "limited con	trol" provisions	apply.	
	Limits on Lo (The term "expenditures"	bbying Expend means amount	itures s paid or incurred	,	(a) Filing organization's totals	(b) Affiliated group totals
.1	 Total lobbying expenditures to influer Total lobbying expenditures to influer Total lobbying expenditures (add line) Other exempt purpose expenditures Total exempt purpose expenditures (add line) Lobbying nontaxable amount. Entercolumns. 	ice a legislative to a	oody (direct lobbyin	9)		
	If the amount on line 1e, column (a) or (b	is: The lobbyin	g nontaxable amoun	it is:		
	Not over \$500,000	20% of the a	mount on line 1e.			
	Over \$500,000 but not over \$1,000,000	\$100,000 plu	is 15% of the excess	over \$500,000.		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plu	s 10% of the excess	over \$1,000,000.		
	Over \$1,500,000 but not over \$17,000,000		is 5% of the excess o			
	Over \$17,000,000	\$1,000,000.			draw was	
	g Grassroots nontaxable amount (enter					
	h Subtract line 1g from line 1a. If zero o		·			
	Subtract line 1f from line 1c. If zero or	less, enter -0-				
	If there is an amount other than ze reporting section 4911 tax for this year	ro on either line	1h or line 1i, did	the organization	file Form 4720	☐Yes ☐ No
-	(Some organizations that made a	Year Averaging section 501(h) el	Period Under sec lection do not hav tructions for lines	tion 501(h) e to complete al		s below.
	Lobbyi	ng Expenditure:	s During 4-Year Av	veraging Period	***************************************	······································
	Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) Total
2	a Lobbying nontaxable amount					
1	Lobbying ceiling amount (150% of line 2a, column (e))					
	Total lobbying expenditures					
					1	
	d Grassroots nontaxable amount					
	Grassroots nontaxable amount Grassroots ceiling amount (150% of line 2d, column (e))					

each "Yes," response on lines 1a through 11 below, provide in Part IV a detailed		a)	(b)
scription of the looplying activity.	Yes	No	Amou
During the year, did the filing organization attempt to influence foreign, national, state or local			
legislation, including any attempt to influence public opinion on a legislative matter or			
referendum, through the use of:			
a Volunteers?	Tagogania del	1	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		7	
c Media advertisements?		7	
mailings to members, legislators, or the public?		1	
e Publications, or published or broadcast statements?		1	
Grants to other organizations for lobbying purposes?	1		
g Direct contact with legislators, their staffs, government officials, or a legislative body?		1	
Rallies, demonstrations, seminars, conventions, speeches, tectures, or any similar means?		1	······································
Other activities?		1	
Total. Add lines 1c through 1i			
Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	10.000	√ [
o If "Yes," enter the amount of any tax incurred under section 4912			24400000000000000000000000000000000000
If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	N	4	. (
t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), o	rsec	tion ,
501(c)(6).			$\sim M/s$
			Yes
Were substantially all (90% or more) dues received nondeductible by members?			1
Did the organization make only in-house lobbying overallity and of to one and any			
and the organization make only intribuse looplying expenditures of \$2,000 or less?			2
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No." O	prior y	ear?	3
Did the organization agree to carry over lobbying and political campaign activity expenditures from the till-B Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," O answered "Yes."	prior y	ear? r sect Part I	3
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Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," O answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of excess does the organization agree to carryover to the reasonable estimate of nondeductible lobby and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) tiv Supplemental Information de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group instructions); and Part II-B, line 1. Also, complete this part for any additional information.	prior y (5), o (5), o of the ing	r sect Part I 1 2a 2b 2c 3	2 3 Ition II-A, line N/A
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Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," O answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of excess does the organization agree to carryover to the reasonable estimate of nondeductible lobby and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) tiv Supplemental Information de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group instructions); and Part II-B, line 1. Also, complete this part for any additional information.	prior y (5), o R (b)	r sect Part I 1 2a 2b 2c 3	2 3 Ition II-A, line N/A
Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," O answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of excess does the organization agree to carryover to the reasonable estimate of nondeductible lobby and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) **IV** Supplemental Information de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group instructions); and Part II-B, line 1. Also, complete this part for any additional information. LB; Line 1f - Grants to Other Organizations for Lobbying Purposes oundation provided funds to Southwest Printers, LLC for a sign, insert cards and banners for the 2017 G.O.	prior y)(5), o R (b) of the ing plist);	r sect Part I 1 2a 2b 2c 3	2 3 Ition II-A, line A/A
Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," O answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues if notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of excess does the organization agree to carryover to the reasonable estimate of nondeductible lobby and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) **IV** Supplemental Information* de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group instructions); and Part II-B, line 1. Also, complete this part for any additional information. I-B; Line 1f - Grants to Other Organizations for Lobbying Purposes	prior y)(5), o R (b) of the ing plist);	r sect Part I 1 2a 2b 2c 3	2 3 Ition II-A, line A/A
Did the organization agree to carry over lobbying and political campaign activity expenditures from the till-B Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," O answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of excess does the organization agree to carryover to the reasonable estimate of nondeductible lobby and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) **IV** Supplemental Information de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group instructions); and Part II-B, line 1. Also, complete this part for any additional information. I-B, Line 11 - Grants to Other Organizations for Lobbying Purposes oundation provided funds to Southwest Printers, LLC for a sign, insert cards and banners for the 2017 G.O.	of the ing	r sect Part I 1 2a 2b 2c 3	ition II-A, line II-A, lines 1
Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," O answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of excess does the organization agree to carryover to the reasonable estimate of nondeductible lobby and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) **IV** Supplemental Information de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group instructions); and Part II-B, line 1. Also, complete this part for any additional information. LB; Line 1f - Grants to Other Organizations for Lobbying Purposes oundation provided funds to Southwest Printers, LLC for a sign, insert cards and banners for the 2017 G.O.	of the ing	r sect Part I 1 2a 2b 2c 3	ition II-A, line II-A, lines 1

SCHEDULE D (Form 990)

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990. Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

OMB No. 1545-0047 2016

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Name of the organization Employer identification number NMMI Foundation, Inc. 85-6010718 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) 3 Aggregate value at end of year 4 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used 6 only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? والمورية إرواده الغالبي عارجا كالمائح المائح المائح المائح المائح المائح ☐ Yes ☐ No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure ☐ Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements 2a 2h Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 tax year Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 5 violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: Assets included in Form 990, Part X O

ARCHARD SHARE	Organizations Maintaining	Collections of A	art, Histo	ical freasi	ires, or C	ther Similar A	ssets (continued)
3	Using the organization's acquisition, a collection items (check all that apply):	ccession, and oth	ner records	, check any	of the follo	wing that are a	significant use of its
a				Loan or exc	hange pro	grams	
b			е 🗆	Other			**************************************
4	The second second device delication of the second s						
**	Provide a description of the organization XIII.	on's collections a	nd explain	now they ful	ther the or	ganization's exer	npt purpose in Par
5	During the year, did the organization sassets to be sold to raise funds rather t	olicit or receive of the han to be maintal	donations o	of art, historion	cal treasure	es, or other simil	
Pa	TIV Escrow and Custodial Arrar	gements.					
	Complete if the organization a 990, Part X, line 21.						
1a	990, Part X, line 21. Is the organization an agent, trustee, included on Form 990, Part X?	custodian or othe	er intermed	iary for cont	ributions o	r other assets n	e transfer and a second and a second as a second
b		t XIII and comple	te the follo	wing table:			☐ Yes ☐ No
					[T	A	mount
C					10	5	
d					. 10	1	······································
0	Distributions during the year				. 10	•	
f	Ending balance				. 1	F	
2a	Did the organization include an amount	on Form 990, Pa	rt X, line 21	, for escrow	or custodia	account liability	? Yes No
b	If "Yes," explain the arrangement in Par	t XIII. Check here	if the expla	nation has b	een provid	ed on Part XIII .	
Pa	4 V Endowment Funds.		**************************************				
	Complete If the organization a	inswered "Yes"	on Form	990, Part IV	line 10.		
-		(a) Current year	(b) Prior ye		years back	(d) Three years back	(e) Four years back
1a	Beginning of year balance	29,203,688	30.77	3,597	30,120,663	26,151,12	
b	Contributions	691,119		8,565	1,170,806	1,056,80	
¢	Net investment earnings, gains, and		······································	-1005	17170,000	1,030,00	064,033
	losses	4,189,139	(72	3,327)	884,056	4 250 484	
d	Grants or scholarships	(715,419)		1,717)	(701,433)	4,258,469	
. 0	Other expenditures for facilities and				(701,433)	(681,989	(545,730)
	programs	(767,809)	100	3,430)	(700 400)	leen was	(222 222
· f	Administrative expenses	(101,603)	100	3,430)	(700,495)	(663,744	(685,359)
g	End of year balance	32,600,718	20.20	3,688	30 330 507		
2	Provide the estimated percentage of the				30,773,597	30,120,663	3 26,151,127
а	Board designated or quasi-endowment		%	ne ig, colum	in (a)) neiu i	38.	
b		2%	70				
C	Temporarily restricted endowment	38%					
	The percentages on lines 2a, 2b, and 2c		1 04				
3a	Are there endowment funds not in the	onsession of the	u zo. Loroanizati	on that are h	old and ad	ministavad fav tla	
	organization by:	300000000000000000000000000000000000000	Olyanizati	on that are n	oru ariu aui	ministered for the	P*************************************
	(i) unrelated organizations						Yes No
	(ii) related organizations		• • • • •				3a(i) /
e.							3a(ii) ✓
b 4	If "Yes" on line 3a(ii), are the related organism Part XIII the Intended uses of	anizations listed a	is required	on Schedule	B7		3b N/A
Par			i s endown	ent tunas.			
			F C	00 0-484			
	Complete if the organization a					See Form 990,	
-	Description of property	(a) Cost or other		Cost or other ba (other)		ccumulated preclation	(d) Book value
1a	Land	3,6	614,357				3,614,357
b	Buildings		193,165				193,165
¢	Leasehold improvements						7.71.7.7
ď	Equipment			19,	27	19,527	0
•	Other						
Fotal.	Add lines 1a through 1e, (Column (d) mus	st equal Form 990), Part X, co	olumn (B), line	10c.)	>	3,807,522

	omplete if the organization an (a) Description of security or category	3m/		
(4) Fig. 12) 4	(including name of security)	ory	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial der				
(2) Closely-neid	equity interests			
(A) SOS B	gton Funds-Research Equity, Arch	ipelago, MCap, Energies		End of Fiscal Year Market Value
(B)	ners and Kabouter International Fu	nds	3,120,518	End of Fiscal Year Market Value
(C) Parister (C)	Stable Fund and Archstone Absolu	te Return Funds	3,470,501	End of Fiscal Year Market Value
(D) Davidson	Kempner and Fortress Partners Ab Bond Fund II, LLC	solute Return Funds	1,043,962	End of Fiscal Year Market Value
(E) Indus Solo	ct International Fund			End of Fiscal Year Market Value
(F) Dock Carie	igs Capital Small Cap Fund			End of Fiscal Year Market Value
(G) Nownard A	sia Institutional Fund LP			End of Fiscal Year Market Value
(H) Canyon Di	stressed, Golub Capital - Private C			End of Fiscal Year Market Value
otal (Column (h) mus	st equal Form 990, Part X, col. (B) line 12.)	redit/Opportunistic		End of Fiscal Year Market Value
	vestments—Program Relate		31,932,331	
	omplete if the omanization and	wordd "Voo" on Corm	OOO Dood IV III.	
	(a) Description of investment	Sweled tes Oll Colli		e 11c. See Form 990, Part X, line 13.
	tel pescriphot of investingit		(b) Book value	(c) Method of valuation:
1)				Cost or end-of-year market value
(2)				
3)				
4) :				
5)				
<u>ප</u> (පි)				
(7)				
(O)				
9)	t provid Form COD Dart V and CO Fine 121 b			
9) otal. (Column (b) musi	t equal Form 990, Part X, col. (8) line 13.)		0	
(9) otal. (Column (b) musi Part IX Oti	ner Assets.			
9) tal. (Column (b) musi Part IX Ott	ner Assets. mplete if the organization ans	wered "Yes" on Form		a 11d. See Form 990, Part X, line 15.
p) otal. (Column (b) musi Part IX Ott Co	ner Assets. mplete if the organization ans	a) Description		e 11d. See Form 990, Part X, line 15.
9) ntal. (Column (b) musi Part IX Ott Column 1) Sketchbook	ner Assets. mplete if the organization ans ("Excerpts From My Sketchbook -	1944" by Peter Hurd	990, Part IV, line	
(9) otal. (Column (b) must Part IX Ott Col 1) Sketchbook 2) Beneficial Inte	ner Assets. Implete if the organization ans ("Excerpts From My Sketchbook - Brest in Perpetual Trust with Albug	1944" by Peter Hurd	990, Part IV, line	(b) Book value
(9) otal. (Column (b) must Part IX Ott Col 1) Sketchbook - 2) Beneficial Into 3) Cash Surrend	ner Assets. mplete if the organization ans ("Excerpts From My Sketchbook -	1944" by Peter Hurd	990, Part IV, line	(b) Book value 50,0
ptal. (Column (b) must Part IX Ott Col 1) Sketchbook - 2) Beneficial Into 3) Cash Surrend	ner Assets. Implete if the organization ans ("Excerpts From My Sketchbook - Brest in Perpetual Trust with Albug	1944" by Peter Hurd	990, Part IV, line	(b) Book value 50,0 708,6
ptal. (Column (b) must Part IX Ott Co. 1) Sketchbook - 2) Beneficial Into 3) Cash Surrend 4)	ner Assets. Implete if the organization ans ("Excerpts From My Sketchbook - Brest in Perpetual Trust with Albug	1944" by Peter Hurd	990, Part IV, line	(b) Book value 50,0 708,6
9) htal. (Column (b) must Part IX Ott Column (c) column	ner Assets. Implete if the organization ans ("Excerpts From My Sketchbook - Brest in Perpetual Trust with Albug	1944" by Peter Hurd	990, Part IV, line	(b) Book value 50,0 708,6
9) otal. (Column (a) must Part IX Ott Co. 1) Sketchbook - 2) Beneficial Inte 3) Cash Surrend 4) 5) 6)	ner Assets. Implete if the organization ans ("Excerpts From My Sketchbook - Brest in Perpetual Trust with Albug	1944" by Peter Hurd	990, Part IV, line	(b) Book value 50,0 708,6
9) otal. (Column (b) must Part IX Ott Co. 1) Sketchbook 2) Beneficial Inte 3) Cash Surrend 4) 5) 6) 7)	ner Assets. Implete if the organization ans ("Excerpts From My Sketchbook - Brest in Perpetual Trust with Albug	1944" by Peter Hurd	990, Part IV, line	(b) Book value 50,0 708,6
(9) otal. (Column (b) must Part IX Ott Col 1) Sketchbook - 2) Beneficial Into 3) Cash Surrend 4) 5) 6) 7)	ner Assets. Implete if the organization ans ("Excerpts From My Sketchbook - erest in Perpetual Trust with Albug ler of Life Insurance Policies	a) Description 1944" by Peter Hurd Luerque Community Found	990, Part IV, line	(b) Book value 50,0 708,6
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Part IX Ott Co 1) Sketchbook - 2) Beneficial Into 3) Cash Surrend 4) 5) 6) 7) 8) 9) otal. (Column (b) Part X Oth	ner Assets. Implete if the organization ans "Excerpts From My Sketchbook - erest in Perpetual Trust with Albug ler of Life Insurance Policies) must equal Form 990, Part X, color Liabilities.	a) Description 1944" by Peter Hurd The property of the second of the s	990, Part IV, line	(b) Book value 50,0 708,6 742,4: 1,501,08
(9) otal. (Column (b) must Part IX Ott Col 1) Sketchbook 2) Beneficial Into 3) Cash Surrend 4) 5) 6) 7) 8) otal. (Column (b) Part X Oth	ner Assets. Implete if the organization ans ("Excerpts From My Sketchbook - Brest in Perpetual Trust with Albuquer of Life Insurance Policies ("Excerpts From My Sketchbook - Brest in Perpetual Trust with Albuquer of Life Insurance Policies ("Excerpts From My Sketchbook - Brest in Perpetual Trust with Albuquer of Life Insurance Policies ("Brest in Perpetual Form 990, Part X, color Liabilities." Implete if the organization answers	a) Description 1944" by Peter Hurd The property of the second of the s	990, Part IV, line	(b) Book value 50,0 708,6 742,4:
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1					
_	Complete if the organization answered "Yes" on Form 990, Total revenue, gains, and other support per audited financial statements	, • CII (7 , 111)	e 12a.	Т	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			1	6,340,15
a	Net unrealized gains (losses) on investments	1-1			
b	Donated services and use of facilities	2a	3,898,140		
C	Pecayaries of prior year greats	2b	4,000		
d	Recoveries of prior year grants	2c			
e	Other (Describe in Part XIII.)	2d	3,300		
3	Add lines 2a through 2d			2e	3,905,44
	Subtract line 2e from line 1			3	2,434,710
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	150,861		
b	Other (Describe in Part XIII.)	4b			
C	Add lines 4a and 4b			4c	150,86
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line	12.)		5	2 606 674
Pani		nents With	Expenses pe	r Return.	
	Complete if the organization answered "Yes" on Form 990,	Part IV, Iin	e 12a,		
1	Total expenses and losses per audited financial statements			1	1,874,798
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a	4,000		
b	Prior year adjustments	2b			
C	Other losses	2c			
, d	Other (Describe in Part XIII.)	2d	3,300		
e	Add lines 2a through 2d	, , ,		2e	7,300
3	Subtract line 2e from line 1			3	1,867,498
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				1,007,400
а	investment expenses not included on Form 990, Part VIII, line 7b	4a	150,861		
	Oak and the amount of the production of the prod		100,001	660453	
b	Other (Describe in Part XIII.)	4b			
b	Other (Describe in Part XIII.)			4c	120 061
С 5	Add lines 4a and 4b. Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin			4c 5	
c 5 Part	Add lines 4a and 4b. Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin Supplemental Information.	ne 18.)	<u> </u>	5	150,861 2,018,359
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Part XIII	Supplemental I	nformation (co	ntinued)		THE THE STREET SELECTION SERVICES AND A PARK THE SERVICE AND A SERVICE A	Paça
Part V; Line 4 -	NMMI Foundation	endowment funds	are invested in perpetul	ly to provide financial st	spoort for NMM	The state of the s
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			grams, athletic program	A 14 CONTRACTOR STREET		in die 1844 das der sie welle der deur von der gerengeniegt der gegengt der deutsgesten des gegenste des
	and maintenance			C. 1010 Miles Dr. Dorallis II.	CALLE UTILLES UTE	·····································
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Part VI: I ina 2d	Other American		out not on Form 990, Par	w in m win is is n as a graph happen on a saw a graph is a age.	***************************************	म्प प्रत्या स्वरंग पर्यम् पंत्रं मृत्यं स्वरंगित्यं स्वरंगित्यं स्वरंगित्यं स्वरंगित्यं स्वरंगित्यं स्वरंगित्
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SCHEDULE F (Form 990)

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. Attach to Form 990.

2016

Department of the Treasury Internal Revenue Service Name of the organization

▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/torm990.

Open to Public Inspection

OMB No. 1545-0047

30000000000000000000000000000000000000	Il Foundation, Inc.	n on Activit	ies Outside	the United States. Com	plete if the organization an	85-6010718 swered "Yes" on
1	Form 990, Part IV, line For grantmakers. Does the assistance, the grantees' e grants or assistance?	e organization	maintain rec	ords to substantiate the am	ount of its grants and other	
2	For grantmakers. Describ assistance outside the Unit	e in Part V ed States.	the organizat	ion's procedures for moni	itoring the use of its gran	
3	Activities per Region. (The f	ollowing Part	l, line 3 table	can be duplicated if additio	nal space is needed.)	
-	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of	(f) Total expenditures for and investments in the region
(1)	Central America/Caribbean	N/A	N/A	Investments	N/A	10,586,935
(2)	East Asia and the Pacific	N/A	N/A	Investments	N/A	3,054,820
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17)	Out total					
	Sub-total					13,641,755
C	Totals (add lines 3a and 3b)					42 044 750

13,641,755

Schedule F (Form 990) 2016

Part II

Page 2 Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

7**	(a) Name of	(h) IBC code	20,000	0 47			מסמווסו שו פלשמה ופ וופכתפת	ופכתפתי	
•	organization	section and EIN (if applicable)	iological (a)	(a) rurpose of grant	(e) Amount of cash grant	(f) Manner of cash	(g) Amount of noncash	(h) Description of noncash assistance	(i) Method of valuation
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Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

Enter total number of other organizations or entities 63

Schedule F (Form 990) 2016

Schedule F (Form 990) 2016

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. Part II

and an	a space	is needed.				-	
(a) type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(b) Method of valuation (book, FMV,
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Schedule F (Form 990) 2016

Pen	V Foreign Forms		Page
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926).	☐ Yes	☑ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990).	☐ Yes	☑ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)	☐ Yes	☑ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621).	☐ Yes	[∕] No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	☑ Yes	Ľ J No □ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)	☐ Yes	☑ No

SCHEDULE (Form 990) Department of the Treasury Internal Revenue Service Name of the organization

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. ▶ Attach to Form 990.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

OMB No. 1545-0047 2016

Open to Public Inspection

NMMI Scholarship Funds **%**□ Recruiting & Admissions eadership Center Ops Faculty/Staff Programs Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form (h) Purpose of grant or assistance Academic Programs Employer identification number Chaplain Programs Athletic Programs ✓ Yes Cadet Activities 85-6010718 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed (g) Description of noncash assistance (e) Amount of non- (f) Method of valuation cash assistance (book, FMV, appraisal, other Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 279,584 (d) Amount of cash 715,409 89,254 5,940 164,544 96,881 31,900 21,460 (c) IRC section (if applicable) the selection criteria used to award the grants or assistance? General Information on Grants and Assistance NAME NIMM で変え NMM NMM NWM NWW 85-6000408 85-6000408 85-6000408 85-6000408 85-6000408 85-6000408 85-6000408 85-6000408 (S) EIN (2) New Mexico Military Institute 1 (a) Name and address of organization (7) New Mexico Military Institute New Mexico Military Institute (3) New Mexico Military Institute (5) New Mexico Military Institute (6) New Mexico Military Institute (4) New Mexico Military Institute (8) New Mexico Military Institute or government WMMI Foundation, Inc. Roswell, NM 88201 Par = Part 9 10 2

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Enter total number of other organizations listed in the line 1 table

Cat. No. 50055P

Schedule I (Form 990) (2016)

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

2016

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or 990-EZ.

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization Employer Identification number NMMI Foundation, Inc. 85-6010718 Part III; Line 4d - Other program services support was used for NMMI cadet activities, athletic equipment and supplies, faculty and staff programs, recruiting and admissions programs and chaplain programs. Part VI; Governance, Management and Disclosure Line 6: The Foundation has members, but not stockholders. Any person making an annual donation of at least \$500 shall be deemed to have met all requirements necessary for membership that year. Any person making a donation of \$5,000 or more shall be considered a life member and no further donation is necessary. The Chairman or CEO may, at their discretion, invite individuals to become members without payment. There are no membership fees charged. Line 7a: The members (referred to above) elect the rotating members of the Board of Trustees. Each member is entitled to one vote. The rotating members of the Board of Trustees are elected at the Annual Meeting of the members. Line 7b: The decisions of the governing body are decided by a majority vote of those Board of Trustees present at all meetings of the Board of Trustees. The Foundation's Executive Committee, made up of six members of the Board of Trustees that includes its CEO, is authorized to act for and on behalf of the Board of Trustees in exercising the Board's authority with respect to all matters affecting the organization, except for: (1) amending, altering or repealing the By-Laws and Articles of Incorporation, (2) appointing, electing or removing any member of any committee or any director or officer, (3) authorizing the sale, lease exchange or mortgage of all or substantially all assets of the Foundation, (4) adopting a plan of merger or consolidation with another corporation and (5) authorizing the voluntary dissolution of the corporation or revoking proceedings therefore, or adopting a plan for the distribution of the assets of the Foundation. Line 9: A complete listing of the Board of Trustees with their respective mailing addresses is listed on Form 990; Part VII; Section A. Line 11a: The final Form 990, including required schedules and other attachments, was provided to all members of the Board of Trustees for review and comment prior to filing with the Internal Revenue Service. Additionally, the Chairman of the Board of Trustees and President & CEO reviewed and discussed the final Form 990, including required schedules and other attachments, prior to filing with the Internal Revenue Service.

If Foundation, Inc. 12c: Each member of the the Board of Trustees and all employees of the Foundation are required to disclosed the property of the Board of Trustees and all employees of the Foundation are required to disclose the property. In accordance with the policy. If a conflict of interest arises with a voting member of the Board of Trustees of the Roard of Trustees are the property of the Board of Trustees and all votes in regard to the matter in conflict. If a conflict is disclosed the property of the Board of Trustees will review the situation and then determine the proper action for the Foundation and the property of the Foundation of the Foundation and the property of the Foundation. Financial ments, budget and investment information are provided to the Executive Committee monthly for review. 15: The five independent members of the Executive Committee of the Foundation annually review the salaries fits of the Foundation employees, which are the (1) President & CEO and (2) Administrative Specialist. 15: The five independent members of the Executive Committee sets the salaries for the upcoming fiscal native Board of Trustees approves these salaries and benefits in conjunction with approving the annual budge in the Board of Trustees approves these salaries and benefits in conjunction with approving the annual budge in the Foundation's website at: 19: The following documents are available at the Foundation's website at: 19: The following documents are available at the Foundation's website at: 20: Administrative Specialist and attachments for the most current three fiscal years 30: Celebrate Policy 40: Celebrate Acceptance of the Executive Committee sets the salaries for the upcoming fiscal interest Policy.	nflict of Interest s, that or arises dation,
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